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CONFIRMATION NO. 2516

SERIAL NUMBER 10/662,457	FILING DATE 09/16/2003 RULE	CLASS 029	GROUP ART UNIT 3726	ATTORNEY DOCKET NO. 081427-0303578					
APPLICANTS Keith M. Lombardi, Farmington, CT; David Workman, Dublin, OH; Stephen R. Crosby, Broad Brook, CT;									
** CONTINUING DATA ***** This appln claims benefit of 60/439,470 01/13/2003 <div style="text-align: center; margin-top: 10px;"> </div>									
** FOREIGN APPLICATIONS ***** <div style="text-align: center; margin-top: 10px;"> </div>									
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 12/09/2003									
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 45%; padding: 5px;"> Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="text-align: center;"> Examiner's Signature </div> <div style="text-align: center;"> Initials </div> </div> </td> <td style="width: 15%; text-align: center; vertical-align: middle;"> STATE OR COUNTRY CT </td> <td style="width: 15%; text-align: center; vertical-align: middle;"> SHEETS DRAWING 10 </td> <td style="width: 15%; text-align: center; vertical-align: middle;"> TOTAL CLAIMS 87 </td> <td style="width: 10%; text-align: center; vertical-align: middle;"> INDEPENDENT CLAIMS 10 </td> </tr> </table>					Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="text-align: center;"> Examiner's Signature </div> <div style="text-align: center;"> Initials </div> </div>	STATE OR COUNTRY CT	SHEETS DRAWING 10	TOTAL CLAIMS 87	INDEPENDENT CLAIMS 10
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ADDRESS 00909 PILLSBURY WINTHROP SHAW PITTMAN, LLP P.O. BOX 10500 MCLEAN, VA 22102									
TITLE TOOL WITH INSERTED BLADE MEMBERS									
FILING FEE RECEIVED 2544	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td><input type="checkbox"/> All Fees</td> </tr> <tr> <td><input type="checkbox"/> 1.16 Fees (Filing)</td> </tr> <tr> <td><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)</td> </tr> <tr> <td><input type="checkbox"/> 1.18 Fees (Issue)</td> </tr> </table>	<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees (Filing)	<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)	<input type="checkbox"/> 1.18 Fees (Issue)			
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